

2013 MAR 19 PH 3:15



Please type or print in ink.

2013 MAR 25 PH 1:12

NAME OF FILER

(LAST)

(FIRST)

CITY OF ALHAMBRA (MIDDLE)
CITY CLERK'S OFFICE

SHAM

STEPHEN

1. Office, Agency, or Court

Agency Name

CITY OF ALHAMBRA

Division, Board, Department, District, if applicable

CITY COUNCIL

Your Position

COUNCILMEMBER - FIRST STREET

► If filing for multiple positions, list below or on an attachment.

Agency: PLEASE SEE ATTACHED LIST

Position: PLEASE SEE ATTACHED LIST

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of ALHAMBRA

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2012.

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election year ____ and office sought, if different than Part 1: ____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 5

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

3/18/13

(month, day, year)

EXPANDED STATEMENT -- STEPHEN K. SHAM -- 2012

1. SAN GABRIEL VALLEY MOSQUITO & VECTOR CONTROL DISTRICT
TRUSTEE
(Annual – Calendar Year 2012)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
SHAM, STEPHEN K.

▶ 1. BUSINESS ENTITY OR TRUST

PLAZA PRINTING

Name
126 E. VALLEY BLVD., ALHAMBRA, CA 91801

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$0 - \$1,999
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Partnership ☐ Sole Proprietorship ☒ **CORPORATION**
Other

VICE PRESIDENT

YOUR BUSINESS POSITION

▶ 1. BUSINESS ENTITY OR TRUST

CHAMPION CONSULTING GROUP

Name
126 E. VALLEY BLVD., ALHAMBRA, CA 91801

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$0 - \$1,999
☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Partnership ☐ Sole Proprietorship ☒ **CORPORATION**
Other

PRESIDENT

YOUR BUSINESS POSITION

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☒ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

☐ None

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold ____
Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☒ \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)

☐ None

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold ____
Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments: _____

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name SHAM, STEPHEN K.	

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

Comments: _____

SCHEDULE D **Income – Gifts**

Name
SHAM, STEPHEN K.

► NAME OF SOURCE *(Not an Acronym)*
AMERICAN CHINESE CULTURE ASSOCIATION

ADDRESS *(Business Address Acceptable)*
25 E. WHEELER AVE., #F, ARCADIA, CA 91016

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 14 / 12	100.00	SHOW TICKET
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE *(Not an Acronym)*
CHINESE CULTURE DEVELOPMENT CENTER

ADDRESS *(Business Address Acceptable)*
2121 W. MISSION RD., ALHAMBRA, CA 91803

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 29 / 12	168.00	SHOW TICKET
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE *(Not an Acronym)*
BURKE, WILLIAMS & SORENSEN

ADDRESS *(Business Address Acceptable)*
444 S Flower St Ste 2400, Los Angeles CA 90071

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05 / 18 / 12	150.00	DINNER
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE *(Not an Acronym)*
THE CONSULATE GENERAL OF PRC IN LA

ADDRESS *(Business Address Acceptable)*
443 SHATTO PL., LOS ANGELES, CA 90020

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Dance Drama Legend of the Sun

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 21 / 12	138.00	SHOW TICKET
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: _____